



M Marshall

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02/17/2006

Marten Marshall
PO Box 372
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Marten Marshall	(Depositor's name)
<i>[Signature]</i>	(Signature)
2/9/06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/715,305	11/17/2003	Marten Dwight Marshall		5114

TITLE OF INVENTION: METHOD FOR CREATING A TWO-SIDED PICTURE

05/09/2006 CNGUYEN1 00000050 10715305

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	05/17/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
COLILLA, DANIEL JAMES	2854	101-485000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Marten Marshall

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Sunset Beach, CALIFORNIA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

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[Signature]

Date 5/2/06

Typed or printed name

Marten D Marshall

Registration No.

App # 10/715,305
Conf # 5114

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Fax

To: Commissioner for Patents	From: Marten Marshall
Fax: (571) 273-2885	Pages: 3 (Including this page)
Phone:	Date: May 9, 2006
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• **Comments:**

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Thank you,

Marten Marshall